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# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6) JUL 25 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

L Name of Lobbyist(s) 🔥	1ARCI BROWN	AND JAMES P. BURNETT TIT
II. Name of lobbyist's pa	artnershin, firm or co	rnoration if any
HDYNTABE	Garantes	APPAIRS, LLC
	a meramp, mm or corporation)	
III. Name of Client	<del></del>	DateDate
Political Contributions		
For each political contrib	ution that is reportable	pursuant to RSA Chapter 664 paid on behalf of the
client/lobbyist and lobbyi	ing firm, indicate the f	ollowing:
Full name of candidate:	Senate Rela	1.1. Mail On
Lant frame of candidate:	(Last Name)	(First Name) (Middle Name/Initial)
Amount of contribution \$	217 00	
Amount of contribution \$	230.00	Office Candidate is Seeking Nh State Senat
If the contribution is an in-k	ind contribution, provide	a description of the goods or services provided, and enter the
more cost of the the think col	uuloudon on the line abo	ove for amount of contribution. If the actual cost is not known
enter an estimated value and	the word "estimate."	
	<del></del>	
•		
	^	
Full name of candidate:	Carson	Shum
	(Last Name)	(First Name) (Middle Name/Initial)
Amount of contribution \$	100,00	Office Candidate is Seeking State Scraft
	100100	Office Candidate is Seeking 5772 30741
If the contribution is an in-ki	ind contribution, provide	a describation of the control of the
SCOUSE COST Of the in Joing com	provide	a description of the goods of services provided, and enter the
enter an estimated volue and	unbution on the line abo	a description of the goods or services provided, and enter the we for amount of contribution. If the actual cost is not known,
enter an estimated value and	unbution on the line abo	a description of the goods or services provided, and enter the ve for amount of contribution. If the actual cost is not known,
enter an estimated value and	unbution on the line abo	a description of the goods of services provided, and enter the ve for amount of contribution. If the actual cost is not known,
enter an estimated value and	unbution on the line abo	we for amount of contribution. If the actual cost is not known,
enter an estimated value and	unbution on the line abo	ve for amount of contribution. If the actual cost is not known,
enter an estimated value and	unbution on the line abo	a description of the goods of services provided, and enter the ve for amount of contribution. If the actual cost is not known,
ener an estimated value and	the word "estimate."	a description of the goods of services provided, and enter the ve for amount of contribution. If the actual cost is not known,
ener an estimated value and	unbution on the line abo	ve for amount of contribution. If the actual cost is not known,
enter an estimated value and  Full name of candidate:	the word "estimate."	Jeb  (First Name)  (Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is neater an estimated value and the word "estimate."	enter the ot known,
	JUL 25 2017
	— NEW HAMPSHIDE
(If more than three contributions were made, report additional contributions on separate addendum C forms.)	DEPARTMENT OF STATE
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing info is true and complete to the best of my knowledge and belief.  (Signature of lobbyist)  [Date]  [Print Name of lobbyist]	ofination

### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) /	PARCI BROWN	AND JAMES	9 BURNATT TIT
II. Name of lobbyist's p			
_		AFFRIKS, LLC	
III. Name of Client			Date 7/18/17
Political Contributions For each political contributions client/lobbyist and lobby	oution that is reportable ing firm, indicate the	e pursuant to RSA Chap following:	ter 664 paid on behalf of the
Full name of candidate:	AVARD (Last Name)	KEVIN (First Name)	(Middle Name/Initial)
Amount of contribution \$	100,00	•	Socking State Senate
enter an estimated value and Full name of candidate:		Ruscell	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	250,00	Office Candidate is	Seeking Executor Council
If the contribution is an in-k actual cost of the in-kind co enter an estimated value and	ntribution on the line abo	e a description of the goods	s or services provided, and enter the tion. If the actual cost is not known,
Full name of candidate:	Morse	Chuck	
	(Last Name)	(First Name)	(Middle Name/Initial) Seeking State Serate
Amount of contribution \$	Z-10.00	Office Candidate is	Seeking JOHNIC JURIC

If the contribution is an in-kind contribution, provide a description of the goods actual cost of the in-kind contribution on the line above for amount of contribution enter an estimated value and the word "estimate."	or services provided, and enter the on. If the actual cost is not known,
(If more than three contributions were made, report additional contributions on separate a Sworn Statement/Affirmation by Lobbyist	ddendum C forms.)
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
(Signature of lobbyist)	7/18/17 (Date)
(Print Name of lobbyist)  Make F. Brown	

# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

L Name of Lobbyist(s)	MARCI BROWN	AND JAMES	of Bornatt TIT		
II. Name of lobbyist's	I. Name of lobbyist's partnership, firm or corporation, if any:  ADVNITTE CONCLIENT AFFINES, LLC (Name of partnership, firm or corporation)				
•					
(Name	of partnership, firm or corporation	AHAIRS, LLC			
III. Name of Client			Date 1/18/17		
Political Contribution					
For each political con	tribution that is reportable	pursuant to RSA Chapt	ter 664 paid on behalf of the		
chemoloobyist and lot	bbying firm, indicate the f	following:			
	$\sim$ .	A			
Full name of candidat		Garu			
	(Last Name)	(First Name)	(Middle Name/Initial)		
Amount of contribution	s 100,00	Office Candidate is	Socking State Senate		
If the contribution is an	in-bind contribution	a a danamata da da da	s or services provided, and enter th		
actual cost of the in-kind	d contribution on the line abo	ove for amount of contribu	tion. If the actual cost is not know		
enter an estimated value	and the word "estimate."				
j.					
72 13 13 13 13 13 13 13 13 13 13 13 13 13	Wa al	$\mathcal{D}.\mathbf{u}$			
Full name of candidate	(Last Name)	(First Name)	(Middle Name/Initial)		
	(Dast Name)	(First Manie)	(MIGUIE MAINE/IIIIIIII)		
_					
Amount of contribution	s 100.00	Office Candidate is			
			Seeking Stale Senat		
If the contribution is an i	in-kind contribution, provided contribution on the line abo	e a description of the goods	Seeking State Senat		
If the contribution is an i	in-kind contribution, provide	e a description of the goods	Seeking State Senat		
If the contribution is an i	in-kind contribution, provided contribution on the line abo	e a description of the goods	Seeking State Schat		
If the contribution is an i	in-kind contribution, provided contribution on the line abo	e a description of the goods	Seeking State Schat		
If the contribution is an i	in-kind contribution, provided contribution on the line abo	e a description of the goods	Seeking State Scrat		
If the contribution is an i	in-kind contribution, provided contribution on the line abo	e a description of the goods	Seeking State Scrat		
If the contribution is an actual cost of the in-kind enter an estimated value	in-kind contribution, provided contribution on the line about and the word "estimate."	e a description of the goods	Seeking State Senat		
If the contribution is an i	in-kind contribution, provided contribution on the line about and the word "estimate."	e a description of the goods ove for amount of contribut	Seeking State Senat s or services provided, and enter the tion. If the actual cost is not known		
If the contribution is an actual cost of the in-kind enter an estimated value	in-kind contribution, provided contribution on the line about and the word "estimate."  e: Bookin (Last Name)	e a description of the goods	Seeking State Senat  s or services provided, and enter the tion. If the actual cost is not known  (Middle Name/Initial)		

f the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the	
actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."	
the state of the s	
(If more than three contributions were made, report additional contributions on separate addendum C forms.)	
to the second water make, report additional contributions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist	
Thave read DCA 15 DCA 15 D and DCA 554 and 1	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)  (Date)	
(Signature of lobbyist)	
JAMES P. BUCKETT III. MAKE J. BROWN	
(Print Name of lobbyist)	

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# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P	I. Name of Lobbyist(s) MA	ec I Brown	AND JAMES J	Boarest TI	
L E	II. Name of lobbyist's partnership, firm or corporation, if any:				
A S E	ADVINTABE C	ONG MEST A	Pfniks, LLC	<del></del>	
P	III. Name of Client			Date	
R I	Political Contributions			· · · · · · · · · · · · · · · · · · ·	
N	For each political contributi	on that is reportable p	ursuant to RSA Chanter	664 naid on behalf of the	
Т	client/lobbyist and lobbying	firm, indicate the foll	lowing:	oo , pand on contain of age	
	Full name of candidate:	Sunuais	Charehola-	-7	
	The state of the s	(Last Name)	(First Name)	(Middle Name/Initial)	
	Amount of contribution \$			eking Gorcha	
	If the contribution is an in-kind actual cost of the in-kind contr- enter an estimated value and th	bution on the line above	description of the goods of for amount of contribution	r services provided, and enter the n. If the actual cost is not known,	
				THE PARTY OF THE P	
	Full name of candidate:	Sununu	Chastocher		
		(Last Name)	(First Name)	(Middle Name/Initial)	
	Amount of contribution \$	000.00	Office Candidate is Se	eking Governo	
	If the contribution is an in-kind actual cost of the in-kind contri enter an estimated value and th	bution on the line above	description of the goods or	r services provided, and enter the n. If the actual cost is not known,	
1		0 4	Russell		
	Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)	
			,	<b>^</b> • • •	
	Amount of contribution \$	50,00	Office Candidate is Se	eking Executive Caucil	

If the contribution is an in-kind contribution, provide a description of the goods or seactual cost of the in-kind contribution on the line above for amount of contribution. I enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions on separate adden	dum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that is true and complete to the best of my knowledge and belief.	1 1
(Signature of lobbyist)	7   18   17 (Date)
(Signature of lobbyist)  James 7. Bonett TT Mare T. Brown  (Print Name of lobbyist)	